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. (Re	equestor's Name)		
(Ad	ldress)		
(Ad	ldress)		
(Cit	ty/State/Zip/Phon	e #)	
PICK-UP	☐ WAIT	MAIL	
(Bu	isiness Entity Nai	me)	
(Document Number)			
Certified Copies	_ Certificate	s of Status	
Special Instructions to	Filing Officer:		

Office Use Only



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SECRETARY OF STATE
OVISION OF BORNSHADONS
14 MAR 25 AM 9: 56

3/2/01

COVER LETTER

Department of State New Filing Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

_{suвјест:} Win	sor Financial Inc	\ '•	
	(PROPOSED CORPORA	ATE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	inal and one (1) copy of the art	ticles of incorporation and	l a check for:
\$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	□ \$87.50 Filing Fee, Certified Copy & Certificate of Status
	,	ADDITIONAL CO	PY REQUIRED
FROM: C	hristopher Winso	Or e (Printed or typed)	
34	101 SW 16th St.		
		Address	
F	ort Lauderdale, F		
94	11-276-6405	State & Zip Celephone number	
wi	nsor.cam@gmail.co	•	notification)

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

3401 SW 16th	NCIPAL OFFICE Principal street address St.	ĭ	Mailing address, if diffe	rent is:	
Fort Lauderda	ile, FL 33312				
	POSE the corporation is organized is: any lawful activity for whicl	n a corpora	ation may be	orgai	nized.
				14 MAR 26 A	SECRETARY OF
alan di salah sala				£ 9.56	F STATE FERVIOR
ARTICLE IV SHA	<u> RES</u> . 1000				
	Christopher Winsor CEO	Name and Title:			
ARTICLE V INIT Name and Title Address	Christopher Winsor CEO 3401 SW 16th St.	Name and Title: Address: Name and Title: Address:		<u></u>	<u></u>

Name and	Title:	Name and Title:
Address		Address:
ARTICLE VI	REGISTERED AGENT	
The <u>name and Flo</u>	rida street address (P.O. Box NOT acceptable) of	the registered agent is:
Name:	Christopher Winsor	
Address:	3401 SW 16th St.	
	Fort Lauderdale, FL 33312	
ARTICLE VII	INCORPORATOR Iress of the Incorporator is:	
	Christopher Winsor	
Name:	3401 SW 16th St.	
Address:	Fort Lauderdale, FL 33312	
	ed as registered agent to accept service of process m samiliar with arid accept the appointment as reg	for the above stated corporation at the place designated in istered agent and agree to act in this capacity
(1)	n'han	3/18/2014
	Required Signature/Registered Agent	Date
	ment and affirm that the facts stated herein are i	rue. I am aware that the false information submitted in a as provided for in s.817.155, F.S.
(3/18/2014
	Required Signature/Incorporator	Date